Chapter O

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#### II. CORRESPONDENCE CONTROL AND REPORTS

#### A. Control

- **1.** Correspondence must be controlled and stamped with the actual date of receipt within three (3) workdays of receipt in the contractor's custody. The control system shall be automated unless the contractor receives approval for another system which will produce comparable results.
- **2.** Information required for appropriate response to inquiries must be retrievable not less then five (5) days following a request for the information. When appropriate, contractor must be able to associate incoming correspondence with prior inquiries.
- **3.** All correspondence or other documents received or generated in the services department shall be filed within five (5) workdays following processing to completion.
- **4.** If correspondence is answered by telephone, a record of the conversation shall be filed with the inquiry.

### B. Categories of Correspondence

(See OPM Part Two, Chapter 11, for definitions.) All incoming correspondence must be separated into the following categories for reporting purposes:

- **1.** Appeals (See OPM Part Two, Chapter 7)
- 2. Grievances
- **3.** Priority correspondence
- **4.** Routine inquiries, including allowable charge complaints and "Tracer

Claims."

**5.** Allowable Charge Complaints

## C. Required Reports

The contractor shall have the capability to provide data for the following management reports:

1. An open correspondence report system which will identify priority correspondence over *ten* (10) days old and routine inquiries over *fifteen* (15) days old for management follow-up action. It is recommended this report include the sponsor's name and SSN, the patient's name, the name of the correspondent, the date of the correspondence, the date the correspondence was received by the contractor, the current status of the correspondence, the date of the latest interim response, and the anticipated or final response statement. This report is for contractor use only and the contractor may use any reporting system it chooses, provided there are adequate controls to meet timeliness standards.

# Beneficiary and Provider Services

II.C.2.

**2.** Correspondence statistics for prompt and accurate completion of the *TRICARE* Monthly Workload and Cycle Time/Aging Reports contained in OPM Part One, Chapter 3.